OG-2805 PINK Rev. 10/01

Michigan Department of Education OFFICE OF BUDGET, CONTRACTS AND GRANTS

Direct questions regarding this form to 31806.

GRANT OFFICE USE ONLY Notification to ITS: Initials:

GRANT AWARD APPROVAL FORM

| 1. Official Name of Grant Program: | | | Date of SBE approval of grant criteria 2-05-98 | | |
|---|--|----------------------------|--|--|---------------|
| | | | | • | |
| 2002 - 2003 State Discretionary Project (years) (title) | ts, Part B | | ☐Initial (type) | ⊠Amendment | ☐Continuation |
| Legislation Authorizing this Grant Program: | P.L. 105-17 Individuals with Disa | bilities Education Act (ID | EA) | | |
| ☑Federal Grant CFDA Number | 84.027A | ☐State Grant | | Other (Private, Foundation) | |
| 2. Type and Purpose of Grant Program: Request for additional funds for the Composupport a three month continuation of the particles. This grant is in the fifth year of a fiscal year 2003-04. | ehensive Parent Services System project which provides coordination | on of several parent supp | port | ⊠Competitive □Formula □Other | |
| | | | | (specify) | |
| 3. SBE Priorities and Policies that this | Grant Program Supports: (chec | k all that apply) | | ······································ | |
| <u>Priorities</u> | Policies Policies | | | Other | |
| ☐Integrating Communities and Schools | □Bullying | | | | - |
| ⊠Elevating Educational Leadership | ☐Character Education | | | (specify) | |
| ☐Embracing the Information Age | ☑Creating Effective Le | aming Environments | | (aposity) | |
| ☐Ensuring Early Childhood Literacy | ☑Family Involvement | | | | |
| ☐Ensuring Excellent Educators | Safe Schools | | | | |
| 5. Target Population to be Served by Go Infants and toddlers, students with disabilit | | | | | |
| 6. Total Funds Awarded: Previous Award: \$475,000 \$137,500 | | То | Total Grant Award: \$612,500 | | |
| 4.00 | /101,000 | | VO 12,50 | | |
| 7. Eligible Applicants: The grantees currently holding the award. | | | | | |
| 8. Description of Priorities Given to An | y Specific Population or Location | on: ⊠NOT APPLICAE | BLE | | |
| 9. Grant Administration: Office Office of Special Education and Early Intervention Services | t ance and Program Management | Contact Linda Domine | | <u>Phone</u> 373-6309 | |

| 10. OFFICE | | | | |
|---|-----------------------------|------------------------|--|--|
| Office Director Approval Signature: | $ \times$ \mathcal{J}_{N} | m | | Date: 5.10.03 |
| Phone: <u>5-0</u> 455 | Comments: | | | |
| 11. BUDGET OFFICE | | | 1 | ************************************** |
| Budget Office Approval Signature: | NA | | | Date: |
| Comments: | | | | |
| | | | | |
| 12. GRANTS OFFICE | | | | , |
| Grants Office Approval Signature: | Maryllo | W Chartal | | Date: 5/19/03 |
| Comments: | | | | |
| | | | 14/23 | |
| | Exhibits Band | I care not reg | eured. | |
| | | U | | |
| 13. DEPUTY SUPERINTENDENT | | 7.0 | 10 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | * |
| Deputy Superintendent Approval Sign | ature: Kuny M | shuke " | | Date: 5-22-03 |
| Comments: | 7 0 | 7 0 | | 4. |
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| 14. SUPERINTENDENT | | | ALL STATE OF THE S | |
| Superintendent Approval Signature: | MI | | | Date: 5-29-03 |
| | | 700 te-6 a 1 1 2 2 1 1 | | Date: |
| Comments: | | | | |
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INSTRUCTIONS:

- A. Complete items 1-10 on this form. The Grants Administration Unit will facilitate completion of items 11-14.
- B. Attach three (3) sets of Exhibits A, B, and C.

Exhibit A---List of applicants (alphabetical order) recommended for funding, the amount requested, the amount recommended, and a three to five sentence abstract of the proposal.

Exhibit B---List of applicants (alphabetical order) not recommended for funding and the amount each requested. Exhibit C---Map of Michigan indicating the location of recommended applicants.

- C. Attach the grant award letters for the Superintendent's signature and the non-award letters for the Service Area Director's signature. The letters should be submitted in the same order given in Exhibit A and/or B. For each final Grant Award Notification letter, a Grant Award Notification form (yellow sheet) also needs to be submitted for the Superintendent's signature.
- D. Transmit Grant Award Approval Form (pink), attachments, and letters to the Grant Administration Unit.

Exhibit A

2002-2003 State Discretionary Projects Under Individuals with Disabilities Education Act (IDEA) Part B

Comprehensive Parent Services System

| Recipient | Previous <u>Award</u> | Additional <u>Award</u> | Total <u>Award</u> |
|---|-----------------------|-------------------------|-----------------------|
| Citizens Alliance to Uphold Special Education (CAUSE) | \$214,000 | \$ 72,250 | \$286,250 |
| The Arc Michigan | \$200,000 | \$ 50,000 | \$250,000 |
| Washtenaw ISD | \$ 61,000 | \$ 15,250 | \$ 76,250 |
| Total Amount Recommended | | \$137,500 | \$612,500 |

Purpose

These additional funds will support a three month continuation of the project which provides coordination of several parent support services. This coordination is intended to maximize the resources available through federal funding as well as improve accountability for providing quality services to parents of students with disabilities. This system can support improved parent involvement in education, strengthen partnerships between families and schools, and enhance parents' knowledge and effectiveness in exercising their rights and responsibilities as identified under the IDEA 97. This grant is in the fifth year of a five year grant and is currently in the process of being rebid for fiscal year 2003-04.